## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

7565-110

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |   |   |                                       |                            |                                 |                  | SMALL ENTITY TYPE |             |                        | OR      | OTHER THAN OR SMALL ENTITY |                        |
|---|---|---|---------------------------------------|----------------------------|---------------------------------|------------------|-------------------|-------------|------------------------|---------|----------------------------|------------------------|
| TOTAL CLAIMS  |   |   | 217                                   |                            |                                 |                  |                   | ΓE          | FEE                    | )  <br> | RATE                       | FEE                    |
| FOR   |   |   | NUMBER FILED                          |                            | NUMBER EXTRA                    |                  | BASIC             |             |                        | OR      | BASIC FEE                  | 740.00                 |
| TOTAL CHARGEABLE CLAIMS   |   |   | 20 minus 20= *                        |                            | * Ø                             |                  | X\$               | 9=          |                        | OR      | X\$18=                     |                        |
| INDEPENDENT CLAIMS  |   |   | minus 3 =  *                          |                            | * 2                             | <u></u>          | X42               | 2=          |                        | OR      | X84=                       | 168                    |
| MU  | LTIPLE DEPEN  | DENT CLAIM PI                             | RESENT                                |                            |                                 |                  | +14               | 0=          |                        | OR      | +280=                      |                        |
| * If  | the difference  | in column 1 is                            | less than zero, enter "0" in column 2 |                            |                                 |                  | тот               | AL          |                        | OR      | TOTAL                      | 908                    |
| CLAIMS AS AMENDED - PART II   |   |   |                                       |                            |                                 |                  |                   |             |                        |         | OTHER                      |                        |
|   |   | (Column 1)                                | (Column 2)                            |                            |                                 | (Column 3)       |                   |             |                        | OR      | SMALL                      |                        |
| <b>AMENDMENT A</b>  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | NUM<br>PREVI               | HEST<br>IBER<br>OUSLY<br>FOR    | PRESENT<br>EXTRA | RAT               | ΓΕ          | ADDI-<br>TIONAL<br>FEE |         | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total   | *   | Minus                                 | **                         |                                 | =                | X\$               | 9=          |                        | OR      | X\$18=                     |                        |
|   | Independent   | *   | Minus                                 | Minus *** LTIPLE DEPENDENT |                                 | =                | X42               | 2=          |                        | OR      | X84=                       |                        |
| لـــا   | THOTFALSE   | ATATION OF MI                             |                                       |                            | · OLAW                          |                  | +14               | 0=.         |                        | OR      | +280=                      |                        |
|   |   |   |                                       |                            |                                 |                  |                   | OTAL<br>FEE |                        | OR      | TOTAL<br>ADDIT. FEE        |                        |
|   |   | (Column 1)                                |                                       | (Colu                      | ımn 2)                          | (Column 3)       |                   |             |                        |         |                            |                        |
| ENT B   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | NUN<br>PREV                | HEST<br>MBER<br>IOUSLY<br>DFOR  | PRESENT<br>EXTRA | RAT               | ΓE          | ADDI-<br>TIONAL<br>FEE |         | RATE                       | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT   | Total   | *   | Minus                                 | **                         |                                 | =                | X\$               | 9=          |                        | OR      | X\$18=                     |                        |
| AME   | Independent   | *   | Minus                                 | ***                        | T CL AIR4                       | -                | X42               | 2=          |                        | OR      | X84=                       |                        |
| <b>_</b>  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                                       |                            |                                 |                  | +14               | 0=          |                        | OR      | +280=                      |                        |
| TOT<br>ADDIT. F   |   |   |                                       |                            |                                 |                  |                   | OTAL<br>FEE | , 1                    | OR      | TOTAL<br>ADDIT. FEE        |                        |
|   |   | (Column 1)                                |                                       |                            | ımn 2)                          | (Column 3)       |                   |             |                        | -       |                            |                        |
| AMENDMENT C   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | NUM<br>PREV                | HEST<br>MBER<br>IOUSLY<br>D FOR | PRESENT<br>EXTRA | RAT               | ΓE          | ADDI-<br>TIONAL<br>FEE |         | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total   | *   | Minus                                 | **                         |                                 | =                | X\$               | 9=          |                        | OR      | X\$18=                     |                        |
|   | Independent   | *   | Minus                                 | ***                        | T CL AU                         |                  | X42               | 2=          |                        | OR      | X84=                       |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                                       |                            |                                 |                  | +14               | 0=          |                        | OR      | +280=                      |                        |
| *   | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |                                       |                            |                                 |                  |                   |             |                        | OR      | TOTAL                      |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |   |                                       |                            |                                 |                  |                   |             |                        |         |                            |                        |